

**Abstract Reproduction Form B-1**

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Title (type in
CAPITAL
LETTERS)IS 24 HOURS REPORTING ON FREQUENCY-VOLUME CHARTS
BY MALES WITH LOWER URINARY TRACT SYMPTOMS DUE
TO BENIGN PROSTATIC HYPERPLASIA, SUFFICIENT?**Aims of Study**

Frequency-volume charts are important in the investigation of people with urination disorders. Our aim is to examine whether reporting during 24 hours is as sufficient as reporting during three or more periods of 24 hours in males with lower urinary tract symptoms (LUTS) due to benign prostatic hyperplasia (BPH).

Methods

In consecutive men presenting with LUTS, mandatory basic initial evaluation, recommended and optional diagnostic tests conforming to the recommendations [1] of The International Consensus Committee on BPH were performed. Males were included in the study if they were older than 50 years without any of the specified exclusion criteria of the Consensus Committee on BPH [1], and frequency-volume charts were available showing voiding and drinking habits during at least three 24 hour periods. From the first period of 24 hours mean diuria, mean voided volume in day time, mean fluid intake in day time, mean nycturia, mean voided volume at night, and mean fluid intake in night time were calculated and compared to those calculated from 3 or more periods. Night time was defined as the period from 11.00 pm until 07.00 am. Values are given as mean \pm standard deviation.

Results

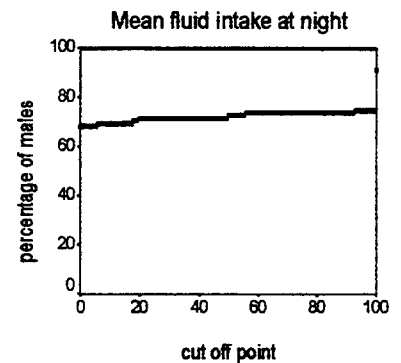
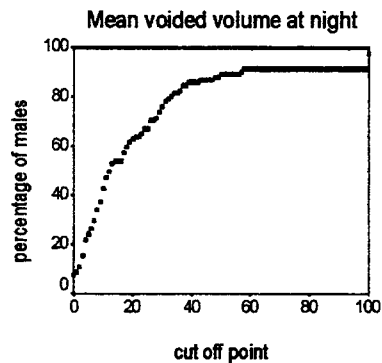
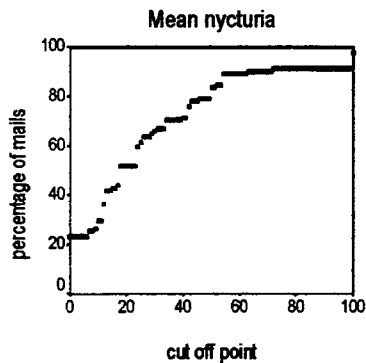
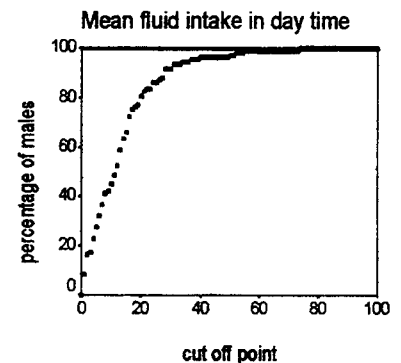
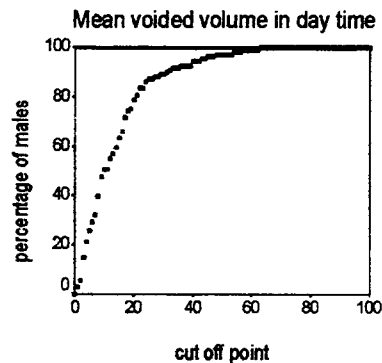
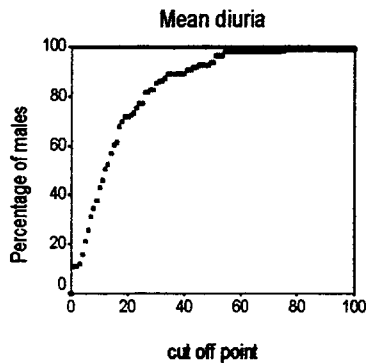
One hundred and nine males (age 65.2 ± 8.4 years) could be included. In the figures the percentage of males is plotted in whom the absolute value of the difference in % of the parameter P calculated from the first 24 hours (P_1) with respect to the parameter P calculated from all 24 hours periods (P_{all}) is less than the cut-off point, thus: the percentage of males in whom

$$\text{absolute value of } 100 \times (P_{all} - P_1) / P_{all} < \text{cut off point}$$

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A reasonable agreement exists between the values calculated from one day time period and those calculated from three or more day time periods. In almost 80% of the males the differences were lower than about 20%. The agreement between the values calculated during night was less pronounced, due to the presence of low values. High values for nycturia are of diagnostic value and the higher the value, the better the agreement between 1 night reporting and three nights reporting will be. For instance: in our group the mean difference of nycturia was 20% in males with a nycturia equal or more than 2, and 43% in males with a nycturia less than 2.

Conclusion

Reporting during 24 hours is sufficient to obtain an insight in the voiding habits and fluid intake in males with LUTS due to BPH.

Reference: 1. Proceedings of the 2nd International Consultation on Benign Prostatic Hyperplasia. Eds. A.T.K. Cockett et al, Jersey, Channel Islands: Scientific Communication International LTD, pp.556-561, 1993.